PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Elieblive Jaliuary 1, 2003										φ	00	18
			1000	S FILED - PART I (Column 1)		(Column 2)		SMALL ENTITY TYPE		OTHER THAN		
TOTAL CLAIMS			14	41				RATE	FEE		RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		ASIC FE			BASIC FEE	-
TOTAL CHARGEABLE CLAIMS			4/	// minus 20= *		21			. 4010			\$130
INDEPENDENT CLAIMS				2 minus 3 = * -			_ -	X\$ 9=		OR		
MULTIPLE DEPENDENT CLAIM P								X42=		OR	X84=	
	18 Ab - 4185			la éa Maria				+140=		OR	+280=	
* (ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	
		(Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF M	Minus	***	<u> </u>	-		X42=	•	OR	X84=	7
-	Trings race	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+140=	,	OR	+280=	
		(Column 1)		10-1	. 01	6	AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
M		CLAIMS		(Colum Highe	ST.	(Column 3)	-		ADDI-	ı		1001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FI	JSLY	PRESENT EXTRA	1	RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,,	X\$ 9=		OR	X\$18=	
	Independent	*	Minus ⁻	***		=	1.	X42=		OR	X84=	•
	JEIHST PHESE	ENTATION OF MI	ULTIPLE DE	PENDENT (CLAIM			140=			+280=	
٠.	· · · · · ·		•		•		L	TOTAL		OR	TOTAL	
		(Oaleman 4)		10 1	•		ADI	OIT. FEE		OR A	DDIT. FEEL	
		(Column 1) CLAIMS		(Column HIGHES		(Column 3)		· 				
3 1	r in the file of all	REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	F	MTE	ADDI- NONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		e	X	\$ 9=		OR	X\$18=	
	Independent	*	Minus	444	:		 			-	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT C	LAIM		_^	42=		OR	∧04E	
	Management to begin	um d'ila inne its d'					+1	40=		OR	+280=	
~ (If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								: ²² 	OR A	TOTAL DIT. FEE	
1	he Highest Num	mber Previously Pat ber Previously Pat	id For IN THI For (Total or	8 8PACE is le Independent	ess than Is the I	3, enter "3." righest number		nt FEE L	opriate box			
		··.								•		